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Bib Data Sheet

CONFIRMATION NO. 9510

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/425,401	10/22/1999	<del>709</del> 717	<del>2427</del> 2124	5231.9-4016
RULE				

## APPLICANTS

JOHN S. YATES JR., NEEDHAM, MA;  
DAVID L. REESE, WESTBOROUGH, MA;  
PAUL H. HOHENSEE, NASHUA, NH;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/385,394 08/30/1999  
which is a CIP of 09/322,443 05/28/1999  
which is a CIP of 09/239,194 01/28/1999

*9/22*  
*9/22*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/12/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 41	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 2	
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance					
Verified and Acknowledged	Examiner's Signature <i>Chang</i>	Initials			

## ADDRESS

38492

## TITLE

PROFILING PROGRAM EXECUTION TO IDENTIFY FREQUENTLY-EXECUTED PORTIONS AND TO ASSIST  
BINARY TRANSLATION

FILING FEE RECEIVED 940	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. cf time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit

<b>SERIAL NUMBER</b> 09/425,401	<b>FILING DATE</b> 10/22/99	<b>CLASS</b> 711	<b>GROUP ART UNIT</b> 2751	<b>ATTORNEY DOCKET NO.</b> 30585/9
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APPLICANT

JOHN S. YATES JR., NEEDHAM, MA; DAVID L. REESE, WESTBOROUGH, MA; PAUL H. HOHENSEE, NASHUA, NH.

  
  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED      THIS APPLN IS A CON OF      09/385,394 08/30/99

WHICH IS A CIP OF      09/322,443 05/28/99

WHICH IS A CIP OF      09/239,194 01/28/99

  
  

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

  
  
  
  
  
  
  

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED

  
  
  
  
  
  
  

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/12/99

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MA	SHEETS DRAWING 41	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 2
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ADDRESS

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 NEW YORK NY 10022

TITLE

PROFILING PROGRAM EXECUTION TO IDENTIFY FREQUENTLY-EXECUTED PORTIONS *And*  
 TO ASSIST BINARY TRANSLATION

<b>FILING FEE RECEIVED</b>  \$940	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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